STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077		
1. TITLE OF NEWSPAPER The EMERY EN	terprise	2. DATE 9-29-18
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBL	PRICE	NUAL SUBSCRIPTION S 32 / 39.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE		
PUBLISHER (Not printers) ST. BOX128 CANISTOTA SO 57012		
6. FULL NAME OF PUBLISHER: Matt ANDERSOM		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.		
FULL NAME COMPLETE MAILING ADDRESS 57012		
ANDERSON Publications, Inc 2	10 W Main ST. Box	128 CANITATA SO
 KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. 		
	AVERAGE NO. COPIES EACH	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	ISSUED PRECEDING 12 MONTHS	ISSUED NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	350	350
 B.PAID AND/OR REQUESTED CIRCULATION Sales through dealers and carriers, street vendors, and counter sales. 	30	35
Mail Subscription (Paid and or requested)	255	237
3. Paid Electronic Copies	233	9637
C TOTAL DAID AND/OR REQUESTED ORGAN ATTOM.		
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	285	275
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS		
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	¥	
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	285	275
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	65	75
2. Return from News Agents		
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	350	350
Statement must be signed by Publisher, Business Mana	ager, or Owner in the presen	ce of a Notary Public
I swear that the statements made by me are true, (Signature)	correct, and complete: OWNEY Edi	tox Ruslighe
te of South Dakota) Sworn to before me this 29 day of Sept. 20/8		
other Mc Cook) Notary Public		
My commission expires: 2/10/2022		
DTARY \ *		

MAHESWAN ANDERSON - ZZ3N. 7th Ane CANIATOTA SO 570/2